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Whittington & Newbold

Urban District Council.



Report

of the

Medical Officer of Health

for the

Year 1912.



Chesterfield :

Wilfred Edmunds, Ltd., Printers, Station Road.



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THE COUNCIL:

Mr. J. H. GREEN, J.P. (Chairman).

Mr. JOHNSON PEARSON, J.P. (Vice-Chairman).

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OFFICIALS OF THE COUNCIL:

Clerk: H. J. WATSON, A.C.A.

Medical Officer of Health:

W. D. CARRUTHERS, M.B., M.R.C.S., D.P.H.

Sanitary Inspector: STEPHEN J. LAVER, C.S.I.

Surveyor: BATHGATE COMB, C.E., M.I.Mun.E.

Health Visitor: Nurse PRITCHARD.

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To the Chairman and Members of the Whittington and Newbold Urban District Council.

Gentlemen,—

I have the honour to submit to you the Annual Report on the health of the district under your charge for the year ending December 31st, 1912.

The Report gives a summary of the work performed under the various Orders of the Local Government Board. That done under the Housing Regulations has occupied a large amount of your time. The number of houses dealt with this year has not been large, but has included most of the worst property in the district. This has taken much time both in inspecting and in supervising the remedying of the defects found, so that the amount of work done can be regarded as satisfactory.

Under the heading of Sanitary Administration your attention has been called to the large amount of clerical work which is now imposed upon the Inspector, and I hope you will see your way to accept the suggestion made to mitigate this.

A new feature in the Report is the work that has been performed by the Health Visitor. By this appointment, which was made in July, the Council have started an organised attempt to reduce the Infant Mortality of the District. In addition, a closer supervision has been possible over the non-notifiable Infectious Diseases.

Under the Tuberculosis Regulations the Council take an important part in the general attack that is now being made against this disease. The actual treatment is undertaken by the County Council, who in a short time will be able to offer this for every stage of the disease.

The work that this Council is called upon to perform is:—

1. The taking of measures to prevent the spread of infection, and to assist the patient's recovery by improving his surroundings where necessary.
2. The searching out of suspected cases, so that the disease may be attacked in the earliest possible stage.

An account of the work done will be found in the appropriate section.

In conclusion, I wish to thank the officials for the help given me, especially Mr. Laver, in compiling many of the sections of the Report, and I beg to remain,

Your obedient Servant,

W. D. CARRUTHERS,

Medical Officer of Health.

GENERAL STATISTICS.

Area of the Combined District in acres :—

Land	...	...	4,161
Water	...	...	18
<hr/>			
Total	...	...	4,179
<hr/>			

WARD.	Area (Approximately).	Estimated Population 1912.	Population Census 1911.
Old Whittington ...	1431	3948	3892
New Whittington ...	427	3661	3609
Whittington Moor ...	262	3624	3573
Newbold Moor ...	564	4821	4753
Newbold ...	1495	1409	1386

Total Population estimated to the middle of the year 17,463.

Assessable Value of the District £32,934 8s. 8d.

Product of 1d. Rate approximately £137 4s. 6d.

SUMMARY OF VITAL STATISTICS.

				1912.	1911.	England and Wales 1912.
Birth and Death Rates per 1,000 of Population.	Birth Rate...	...	...	30·4	30·2	23·8
	General Death Rate	...	...	11·5	18	13·3
	Diphtheria and Croup	...	...	0	0·34	
	Enteric Fever	...	...	0	0·28	
	Diarrhœa	...	...	0·4	2·02	
	Phthisis	...	...	0·62	0·52	
	Other Tuberculo's Diseases	...	...	0·28	0·4	
	Cancer	...	...	0·68	0·86	
	Respiratory	...	...	2·5	4·05	
Infantile Death Rate per 1,000 Births				82·7	193·1	95

Annual Report

OF THE

Medical Officer of Health

For the Year 1912.

A. Natural and Social Conditions of the District.

1. The Urban District of Whittington and Newbold lies in the North-Eastern Division of Derbyshire, on the watershed of the river Rother. On the south it is continuous with the Borough of Chesterfield, in the south-west it lies against the Brampton and Walton Urban District, elsewhere it is surrounded by the Chesterfield Rural District.

The District is divided into five Wards:—

No. 1. The Old Whittington Ward, which lies between No. 2, the New Whittington Ward, at the north-east corner of the District, and No. 3, the Whittington Moor Ward on the south-east. On the west side of this Ward is No. 4, the Newbold Moor Ward, which on its north side is continuous with the Old Whittington Ward, and on the west with No. 5, the Newbold Ward.

The District is four miles long from Holme Farm, in the Newbold Ward, to the Handley Road, in the New Whittington Ward. The broadest portion is $2\frac{3}{4}$ miles in extent from Roughpiece Wood in the Old Whittington Ward to Stonegravels.

The elevation of the District above the sea-level varies from 600 to 200 feet. It is highest at the most northern parts of the Old and New Whittington Wards, but all portions slope downwards towards the River Rother on the east border.

The geological formation is that of the coal measures; the sub-soil is chiefly clay. Several coal pits exist in the district; at the present time only four are working.

The area of the district is 4,179 acres, 18 of which is water.

The estimated population in the middle of 1912 was 17,463, an increase of 179 since last year.

There are 3,701 dwelling-houses in the district, as follows: —

Ward 1	...	...	...	...	...	...	902
Ward 2	...	...	...	...	...	...	777
Ward 3	...	...	...	...	...	...	712
Ward 4	...	...	...	...	...	...	988
Ward 5	...	...	...	...	...	...	322

Since the census was taken in April, 1911, 110 houses have been erected, 9 in Ward 1, 12 in Ward 2, 33 in Ward 3, 30 in Ward 4, and 26 in Ward 5. In 1912 23 new houses were erected.

2. Occupation of the Inhabitants.

This year, through the courtesy of the County Medical Officer, I am able to give in detail the various occupations of the inhabitants of the district at the time of the census in 1911. It will be seen that the majority of men work in the coal mines and at the iron works. These live chiefly in Wards 1, 3 and 4. At New Whittington there are a large number who are employed on the railway.

WHITTINGTON AND NEWBOLD URBAN DISTRICT.

OCCUPATION.	MALES.			FEMALES.			
	Total.	Single or Widowed	Married	Total.	Single.	Married.	Widowed.
1. General or Local Government of the Country ...	25	8	17	5	4	1	...
2. Defence of the Country ...	4	3	1	...	...	...	...
3. Professional and their Subordinate Services ...	86	42	44	104	84	13	7
4. Domestic Offices or Services ...	33	13	20	334	289	20	25
5. Commercial Occupations ...	215	96	119	12	12	...	...
6. Conveyance of Men, Goods, and Messages ...	633	245	388	...	...	...	...
7. Agriculture ...	125	64	61	15	11	1	3
8. Fishing ...	...	...	...	...	...	...	...
9. In and about Mines and Quarries ...	1655	753	902	4	4	...	...
10. Metals, Machines, Implements and Conveyances ...	1469	699	770	6	4	2	...
11. Precious Metals, Jewels, Watches, &c. ...	10	2	8	3	3	...	...
12. Building and Works of Construction ...	227	83	144	...	...	...	...
13. Wood, Furniture, Fittings, and Decorations ...	153	91	62	10	8	2	...
14. Brick, Cement, Pottery and Glass ...	350	195	155	222	206	14	2
15. Chemicals, Oils, Grease, Soap, Resin, &c. ...	19	10	9	26	26	...	...
16. Skins, Leather, Hair, and Feathers ...	14	6	8	8	8	...	...
17. Paper, Prints, Books, and Stationery ...	15	9	6	46	44	...	2
18. Textile Fabrics ...	14	9	5	60	54	5	1
19. Dress... ...	69	28	41	155	132	14	9
20. Food, Tobacco, Drink, and Lodging ...	310	129	181	168	103	43	22
21. Gas, Water, Electricity and Sanitary Service ...	35	5	30	...	...	...	...
22. Other, Undefined Workers and Dealers... ..	265	118	147	41	28	8	5
23. Total Occupied ...	5726	3608	3118	1219	1020	123	76
Without Specified Occupations or Unoccupied...	899	805	94	4952	1507	3144	301
Total (aged 10 years & up.) Occupied & Unoccupied...	6625	3413	3212	6171	2527	3267	377

3. The amount of Poor Law Relief granted during the year ending March, 1912, was £1,074 for the parish of Whittington, and £840 for Newbold. This is £429 less than last year, when the figures were £1,210 for Whittington and £1,133 for Newbold.

B. Sanitary Circumstances of the District.

1. Water Supply.

The Chesterfield Gas and Water Board supply 3,673 out of the 3,701 houses in the district. The supply is constant and of good quality. The Board are not bound to supply any part of their area that is higher than 400 feet; in this district a small part of the Old Whittington and New Whittington Wards exceeds this limit, but as it is practically purely agricultural no inconvenience is felt.

There are only 28 houses with an approximate population of 140 that are not supplied through the public source. Eight of these are in the Meadows, the others are scattered all over the district. These houses obtain their water from 27 deep wells and one spring. It has not been found necessary to close any during the year.

2. Rivers and Streams.

A stream that arises in the Newbold Moor Ward passes near Pearson's Pit, then under the Sheffield Road along Pottery Lane, close to which it enters the River Rother, was found to be grossly polluted with the sewage of 30 houses. Previously to this year, when Pearson's Pit was working, the sewage was diluted by large volumes of water pumped from the colliery, so no nuisance was caused. The Council have now dealt with this by extending the sewer to take the sewage from Hallows Place and from certain of the houses in Pottery Lane.

3. Drainage and Sewerage.

In the autumn 120 yards of sewer were laid in Stand Road to take the sewage from 14 houses in Hallows Place. The sewer was

extended 108 yards in Pottery Lane for the sewage of 16 houses which polluted the stream mentioned in the previous section.

During the year a scheme has been prepared for treating the sewage of the whole district on the site of the Whittington Sewage Works, and an inquiry will shortly be held by the Local Government Board to consider this.

4. Closet Accommodation.

During the year a careful survey has been made of the Closet Accommodation of the district. The existing types are shown in the accompanying table, from which it will be seen that in 2,437 instances out of the 3,234 the conservancy system prevails. The Council has now decided that these shall be gradually converted to the water carriage system, and further that in all new houses w.c.s must be erected except in the purely rural portions of the district.

In the table the number of privies and pits are given separately, but in estimating the number of w.c.s that will be required the number of privies should only be taken :—

Ward.	Privies.	Pits.	Pails.	Water	Slop
				Closets.	Closets.
Old Whittington	635	314	67	148	—
New Whittington... ..	460	267	14	189	—
Whittington Moor	422	222	—	226	4
Newbold Moor	599	323	35	107	—
Newbold	205	129	—	123	—
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	2321	1255	116	793	4

During the year 77 privies were converted to water closets, and 19 insanitary privies were repaired.

5. Scavenging.

The scavenging of the whole district is done by the servants of the Council, except that of the Pail Closets which belong to the Sheepbridge Company, who empty these themselves. In addition to the privy pits, the number of which has been already referred

to, the refuse from 138 dry pits, 14 pail closets, and 498 ash tins, has to be dealt with. The ash tins are emptied weekly, the pits are cleansed as often as required. In 1912 those in Wards 1, 2 and 3 were cleansed just over three times, Ward 4, 4 times, and Ward 5, $2\frac{1}{4}$ times. 9,265 loads of refuse were removed, at a cost approximately of 4/9 per house. The total cost being £914 17s. 6d.

There are 10 tips for night soil and 2 for dry ashes in various parts of the district.

6. Sanitary Inspections of the District.

The tabular statement prepared by Mr. Laver, as required by the Local Government Board, is appended:—

	Informal Notices Served by Sanitary Inspector.	Legal Notices Served by Local Authority.	Nuisances Abated.
<i>Drainage—</i>			
No Disconnection of Waste Pipe ..	2	—	2
Defective Traps, Inlets, and Drains	25	4	19
Drains Obstructed	21	—	21
<i>Closets and Ashpits—</i>			
Insanitary Privies and Ashpits ..	28	—	19
Insufficient Closet Accommodation ..	1	—	—
Conversion of Privies into W.C.'s ..	88	—	77
Defective Water Closets	2	—	2
<i>Other Defects—</i>			
Surfaces of Courts and Yards ..	10	—	4
Eaves-Spouts and Down-Spouts ..	14	—	12
Urinals Defective	1	—	1
Water Supply	—	—	—
Offensive Accumulations	7	—	12
Animals improperly kept	2	—	2
Pigsties	2	—	2
Smoke Nuisances	—	—	1
Overcrowding	—	—	—
Foul Condition of Houses . ..	2	—	2
Repairs to Houses	8	—	45
Totals ..	290	4	221

	Number on Register.	Inspections Made.	Notices Served.
Dairies, Cowsheds, and Milkshops ..	46	88	—
Bakehouses	7	18	—
Slaughterhouses	13	45	—
Offensive Trades	—	—	—
Common Lodging Houses	—	—	—
Totals ..	66	151	—

Action taken by Inspector against spread of Infectious Disease. Printed and verbal instructions given. Disinfectants supplied free. Houses disinfected with formaldehyde.

Infected Houses Disinfected 174.

Samples of Water submitted for Analysis —

Other Action taken 176 Tins Milk surrendered. 14 food preparation places inspected as required.

7. Premises and Occupations which can be controlled by Bye-laws or Regulations.

The question of the revision and addition to the bye-laws that existed in the former districts has occupied a considerable amount of the Council's time during the year. Provisional approval by the Local Government Board has now been received for the following relating to:—

Nuisances.

Drainage of existing Buildings.

Common Lodging Houses.

Slaughter Houses.

Houses let in Lodgings.

Offensive Trades.

Tents, Vans, Sheds and similar structures.

New Streets and Buildings.

Alteration of Buildings.

And for Regulations made under the Dairies, Cowsheds and Milkshops Orders.

The Council in February, by means of Section 51 of the Public Health Act Amendment Act, 1907, declared the following busi-

nesses to be offensive trades:—Blood Drier, Tanner, Leather Dresser, Fat Melter or Fat Extractor, Glue Maker, Size Maker, Gut Scraper, Dealer in Rags and Bones, and Fish Frier. The only offensive trades now present in the district are Dealers in Rags and Bones and Fish Friers.

There are no lodging houses or cellar dwellings in the district.

Thirteen Slaughter Houses are on the Register. They were inspected 45 times in the year; no notices were necessary.

8. Schools.

There are seven Public Elementary Schools in the district. The average number of children attending in the year was 2,901.

During the year the County Education Committee opened new Infants' Schools at Old Whittington and New Whittington. The Newbold Moor School has been practically re-built. Whittington Moor Mixed School will shortly be closed for extensive alterations. The Mixed Schools at Old and New Whittington will be dealt with afterwards.

All the Schools are supplied by water from the public source.

The Newbold Edmund Street and the Whittington Moor Schools were disinfected in October owing to the prevalence of scarlet fever. It was not found necessary to advise the closure of any of the schools or departments during the year.

The action taken in dealing with infectious disease will be found in the Infectious Disease section of the Report.

The Medical Inspection of the Schools is controlled by the County Education Committee, and is undertaken by your Medical Officer of Health.

9. Food.

(a) Milk Supply.

Thirty-seven cowkeepers are on the Register. There are approximately 230 cows in the district.

Ten purveyors of milk are registered, but most of the cow-keepers are milksellers.

The cowsheds were inspected 88 times during the year. No notices were served. No cows were condemned on account of tuberculous udders.

Most of the milk is produced within the district, though a certain amount is imported from Cutthorpe and Chesterfield.

Condensed milk is largely used in the district; during the year 176 tins were surrendered as being unfit for food.

(b) Other Foods.

There are 14 premises where foods are prepared. These have been visited several times by the Inspector. No articles were condemned during the year.

There are seven bakehouses in the district. No underground bakehouses exist. Eighteen inspections were made, but no sanitary defect was found.

There are 13 slaughter-houses. These were visited 45 times during the year. No notices had to be served. No unsound meat was discovered.

10. Housing.

The work performed under the Housing Regulations in the various Wards of the district is shown in the following table:—

SUMMARY OF WORK UNDER THE HOUSING REGULATIONS.

	Old Whitting- ton Ward.	Whitting- ton Moor Ward.	New Whitting- ton Ward.	New- bold Moor Ward.	Newbold Ward.	Totals.
Number houses inspected	10	40	19	53	..	122
„ Closing orders	4	3	..	..	..	7
„ declared unfit for human habitation	4	18	..	..	..	22
Number Closed	4	..	..	..	..	4
Demolition Orders ..	4	..	..	..	..	4
Number Notices served under the Public Health Acts, etc.	3	36	9	36	..	84
Number Notices Sec. 15. Housing Town Plan- ning Act.	2	..	..	4	..	6
Notices complied with ..	13	17	4	11	..	45

The chief defects found are:—

- (1) Dampness, from rising damp, driving rain, defective roofs and rain water spouts.
- (2) Defective drainage.
- (3) Unpaved yards.
- (4) Defective privies.

At the present time there is a scarcity of good houses for artisans and labourers. There are indications that this need is being met by private enterprise. Only recently plans were passed for 56 houses at New Whittington. Since the census 110 houses have been erected in various parts of the district.

The supervision over the erection of new houses is undertaken by the Surveyor.

11. **Factories and Workshops.**

Appended are given the tables supplied by the Home Office, which show in detail the work performed during the year:—

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

Premises.	Number of		
	Inspection.	Written Notices.	Prosecutions.
Factories (including Factory Laundries	18	2	—
Workshops (including Workshop Laundries)	67	4	—
Workplaces (Other than Outworkers' Premises)	14	—	—
Total	99	6	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars.	Number of Defects.			Number of Prosecu- tions.
	Found	Remedied.	Referred to H.M. Inspect'r	
Nuisances under the P.H. Acts— Want of Cleanliness	4	4	—	—

3.—HOME WORK.

Nature of Work.	Outworkers' Lists.				Outwork in infected premises.	
	Sending twice in the year.			Notices served on Occupiers as to keeping or sending lists.	In- stances.	Orders made.
	Lists.	Outworkers.				
		Con- tractors.	Work- men.			
Wearing Apparel—						
(1) making, &c. ..	6	..	14	1	1	..
(2) cleaning & washing ..	..	..	..	..	..	..
Household linen .. ..	..	..	..	..	..	..
Lace, lace curtains & nets	2	..	18	..	..	..

4.—REGISTERED WORKSHOPS.

Bakehouses	7
Dressmakers	7
Joiners	5
Bootmakers	3
Smiths	4
Potters	2
Aerated Water	2
Millinery	2
Packing	1
Cabinet Maker	1
Crate Maker	1

Watchmaker	..	..	..	..	..	I
Wheelwright	..	..	..	..	..	I
Firewood Chopper	..	..	..	..	..	I
Printer	..	..	..	..	..	I
Sadler	..	..	..	..	..	I
Total number of workshops on Register						40

5.—OTHER MATTERS.

Action taken in matters referred by H M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act.	Notified by H.M. Inspector	2
	Reports (of action taken) sent to H.M. Inspector ..	2

C. Sanitary Administration in the District.

1. Staff.

The staff, in addition to the Medical Officer, consists of the Inspector of Nuisances and the Health Visitor. At the present time we are badly in need of clerical assistance in the office. The Inspector now has to spend a day each week and occasionally two there in order to keep abreast with this work. The difficulty could to some extent be met if Mr. Laver was allowed to have a pupil, who might be given a few shillings a week for his services in the office.

On July 15th the Health Visitor commenced her work. The appointment is made jointly by the County Council and the District Council. The duties under the County Council are those connected with the supervision of midwives and as School Nurse. For the District Council her work is that under the Notification of Births Act and the Tuberculosis Order.

2. Hospital Accommodation.

In last year's Report your attention was drawn to the small size of the Joint Isolation Hospital, and to the difficulty of sending cases to it in consequence. This year more cases have been sent from this district than in any previous year, and in fairness to

those responsible for the Hospital Administration I must add that only a few cases were refused owing to lack of accommodation. The circumstances under which this was rendered possible however were peculiar and cannot be expected to arise again. The Hospital Committee was able to accept the cases in the autumn months by arranging with the Committee of Management of the Spital Smallpox Hospital to take the convalescent scarlet fever cases. By this means practically all those from this district were received, but this was only possible because there was no outbreak of scarlet fever in the Borough and in Brampton and Walton, an area in which there is a population of 40,250. In the same period no cases were admitted of enteric fever or diphtheria from the whole area served by the Hospital, the population of which is 57,713, so that all the beds could be devoted to those of scarlet fever. The question of enlarging Penmore Hospital has been the subject of correspondence between the Local Government Board and the Hospital Committee during the last few months. The matter has been carefully considered, and as the County Council's scheme for the treatment of Tuberculosis involves the provision of six beds at Penmore it was decided to take no action until the proposals of the County Council have been received.

3. The Adoptive Acts in force in the district are :—

The Private Streets Works Act, 1892.

The Public Health Act Amendment Act, 1890 (Parts 2 & 3).

The Infectious Disease (Prevention) Act, 1890.

The Public Health Act Amendment Act, 1907 (Parts 2, 3, 4 and 5).

The Notification of Births Act, 1907.

D. Prevalence of and Control over Acute Infectious Diseases.

Notifiable Diseases.

In the accompanying table the number of cases of notifiable infectious disease during 1912 are given, together with those for the five preceding years.

In another further details are given of the 1912 cases, showing the monthly incidence, distribution, the ages of the patients, and the number sent to the Isolation Hospital.

Number of Cases of Infectious Disease notified during the last six years.

Year.	Smallpox.	Scarlet. Fever.	Diphtheria.	Enteric Fever.	Erysipelas.	Puerperal Fever.	TOTAL.
1907	...	29	10	5	12	3	59
1908	...	37	9	2	20	—	68
1909	...	90	25	6	22	—	143
1910	...	69	9	9	8	—	95
1911	...	79	17	21	12	—	129
1912	...	163	3	1	8	2	177

Infectious Diseases notified in 1912.

		NO. SENT TO HOSPITAL.					
Month.		Scarlet Fever.	Diphtheria.	Enteric. Fever.	Scarlet Fever.	Diphtheria.	Enteric. Fever.
January	...	14	...	1	4	...	1*
February	...	11	1	...	1	...	...
March	...	8	...	...	5	...	...
April	...	11	...	...	2	...	...
May	...	9	...	...	4	...	...
June	...	3	...	...	1	...	...
July	...	7	...	...	3	...	...
August	...	10	...	...	5	...	...
September	...	20	...	...	20	...	...
October	...	32	...	...	24	...	...
November	...	21	2	...	6	...	...
December	...	17	...	...	11	...	...
		—	—	—	—	—	—
		163	3	1	86	...	1

* Sent to the Workhouse Infirmary.

In Table II. of the Local Government Board, the ages of the patients, and the Wards in which they live are given.

It will be noted that there has been a considerable increase in

the number of cases of Infectious Disease notified this year compared with the previous five years. This is due to the continuance of the outbreak of scarlet fever that started in the Newbold Moor Ward last autumn. The number of cases of other types of Notifiable Infectious Disease is small and compares very favourably with the statistics of the preceding five years.

Action taken after Notification of Infectious Disease.

All cases are visited as soon as possible by the Sanitary Inspector, who makes careful inquiries with a view to finding the source of infection. When isolation can be carried out at home efficiently the case is not removed to the Isolation Hospital. The room occupied by the patient is disinfected by formic aldehyde vapour or sulphur on the termination of the case or on removal to hospital. When the child is nursed at home disinfectants are supplied gratis, and a card is left to be signed by the medical man in charge of the case when he considers that disinfection may properly be carried out. The school teachers are notified at once if the patient is of school age or if any children in the house are attending school. These notifications have been drawn up in accordance with the recommendations contained in the Joint Memorandum of the Local Government Board and the Board of Education. A second notice is sent when the child or the other children in the house may safely return to school. Similar notices are sent to the Sunday School Authorities, and when necessary the Public Libraries are also informed.

For cases of Diphtheria the Council have arranged that a supply of fresh Antitoxin will be kept by Mr Twelves, of Whittington Moor, and Mr. Houston, of New Whittington. In cases where the practitioner in attendance is of opinion that this cannot be paid for by the patient it will be provided at the cost of the Council.

BACTERIOLOGICAL AIDS TO DIAGNOSIS.—During the year 18 specimens were examined in the County Laboratory from this district.

Disease.	Result.	
	Positive.	Negative.
Diphtheria	1	6
Phthisis	2	5
Enteric Fever	—	4
	3	15

A supply of outfits is kept at the depot for the use of medical practitioners. These are provided, and the subsequent examination is undertaken free of cost by the County Council.

SCARLET FEVER.—During the year 163 cases were notified. This is by far the largest number in recent years. The disease originated in the Newbold Moor Ward in the autumn of 1911. It slowly spread to the adjoining Whittington Moor Ward and those parts of the Old Whittington and Newbold Wards that immediately adjoin the Moor Wards. Five cases occurred in the New Whittington Ward, but were not connected in any way with the other cases. The area where the epidemic occurred is the most congested part of the district. There are four schools in it with an enrolment of 1,643 children. The majority of the houses contain only four rooms, and the average number of persons per house is five. From the table it will be seen that fresh cases occurred each month of the year, the majority being, as is usual, in the last quarter. The type of the disease was mild, only two cases ending fatally. Careful inquiries were made in each case to trace the source of infection, the schools were visited regularly, and those in contact with any case were examined. It was not found desirable to advise the closure of any of the schools. From the evidence obtained it appeared that personal contact with a mild case of the disease was responsible for the majority. In most instances this took place outside the school, though in ten attendance at school probably was the cause. Eighty-six of the 163 cases were removed to the Isolation Hospital, whose accommodation in the autumn months was taxed to the utmost. In a few instances it was not possible to send the

children away as the Hospital was full. This is the largest number of cases sent to the Hospital from this district since it was opened in 1905, only those that could not possibly be nursed at home were removed, though owing to the smallness of the houses I doubt if those that remained at home could be efficiently isolated. Scarlet fever has certain characteristics that must be remembered when dealing with the question of the desirability of Hospital Isolation. In ordinary cases the patient is only really ill during the first week or ten days, but he remains infectious usually for five weeks afterwards. If he is nursed at home the only way of isolating him is to confine him to one room. This is almost impossible in a small house, but if it can be done it entails that his nurse, who is usually his mother, will have to keep constant watch over him for about five weeks though he feels quite well, to prevent him from escaping to play with other children, and so spreading the disease; this the mother with her numerous other duties to perform cannot be expected to do. Owing to these difficulties it is safer for the benefit of others that all children who live under such conditions should be removed to the Isolation Hospital. Whilst from the patients' point of view this is infinitely preferable to treatment at home, for in hospital when he is ill he is nursed by specially trained nurses, during the long convalescent period he can play in the open-air with children in the same stage of the disease, and so returns home strong and well and in marked contrast to those who have been nursed at home.

The continuance of the epidemic in spite of the vigorous measures taken to control it is probably due to the very mild type of the disease and the large number who are unprotected by not having had scarlet fever. Several instances were found of children who had only been absent from school for one or two days, the real nature of whose illness was unsuspected by their parents until peeling was noticed about two weeks afterwards. In January, 1913, when the schools re-opened after the holidays I inquired how many children present had ever had scarlet fever and found that out of a total of 1,588 only 182 were protected by a previous attack. This number included, of course, all the children present on the

day of inquiry, but as every year that elapses after a child has left the Infants' Department finds him less susceptible to the disease the number of unprotected must not be taken too literally, it merely shows that in spite of the disease being present in the area for 15 months a large number of children can be found who have not contracted it.

DIPHTHERIA.—Three cases were notified during the year. No fatality occurred. Two of these were school children, they were not allowed to return until two bacteriological examinations of the throat and nose were negative. Swabs were taken from the contacts with negative results. The third case, although it appeared clinically to be diphtheritic, proved subsequently to be suppurative tonsillitis.

ENTERIC FEVER.—Only one case was reported; investigation showed that the disease was contracted when the patient was on a visit to Nottingham. He was removed to the Workhouse Infirmary and made a good recovery.

ERYSIPELAS.—Eight cases were notified during the year. Five of these occurred in the age period 45—65. None ended fatally.

The Non-Notifiable Diseases.

During the year the following diseases were notified by the school teachers:—Measles, 57; Whooping-cough, 26; Chicken-pox, 2. These numbers do not give the actual number of children who suffered from these diseases, as they only refer to those in attendance at school. Since the appointment of the Health Visitor in July all cases notified have been followed up, and many others under school age were discovered and visited. These visits occupied a large amount of the Health Visitor's time in the last quarter of the year. In each instance the parents were urged to obtain medical advice, if they had not already done so. Instructions were given on how to limit the spread of infection and to minimise the risk of complications arising, such as pneumonia, which is commonly the cause of the fatalities in measles and whooping-cough.

It is hoped that these visits will result in the parents not regarding measles and whooping-cough as lightly as so many do. It is only too common to hear the view expressed that these diseases cannot be avoided in childhood and the sooner they are over the better. In consequence little attempt is made to isolate the sick, who are often discovered walking about the living room in a semi-nude condition, with the result that complications, such as pneumonia, are frequent. The sequelae of these diseases often cause a good deal of suffering and sometimes permanently injure the child. Many of the cases of tuberculous glands that occur can be traced to a previous attack of whooping-cough or measles, while the latter is often responsible for the development of adenoid growths, ear discharges and deafness. It cannot be too widely known that in taking measures to protect a child from the onset of measles and whooping-cough there is a double gain, for the older the child is the less susceptible he becomes to these diseases, and if attacked the course of the disease is usually milder and the troublesome sequelae that have been previously mentioned are less common.

MEASLES.—An outbreak of this disease occurred in the 2nd quarter of the year in the Newbold and Newbold Moor Wards, and in the 3rd quarter at Old Whittington. A few cases were reported in New Whittington in November. Only two deaths occurred in the year. This number compares favourably with the 15 registered in 1911.

WHOOPING-COUGH.—Cases of this disease occurred in the 3rd and 4th quarter of the year in Newbold Moor, and in the last quarter there was an outbreak in the Brushes area. Five deaths were registered, compared with 8 in the previous year.

E. Prevalence of and Control over Tuberculosis.

(a) Pulmonary Tuberculosis.

Since January 1st all cases of pulmonary consumption have been notifiable. The Local Government Board ordered that all

Poor Law cases should be notified in 1908; in 1911 hospital cases became notifiable, and on January 1st, 1912, the order was extended to all cases. Twenty-eight cases have been notified under these orders during the year. In the table the age period and ward distribution is shown:—

		All ages.						Ward Ward Ward Ward Ward					Deaths
			1-5	5-15	15-25	25-45	45-65	1	2	3	4	5	
Poor Law Cases	..	6	—	—	1	4	1	2	2	—	1	1	1
Hospital	..	4	1	—	2	1	—	2	—	1	1	—	2
General	..	18	—	3	5	7	3	5	1	3	5	4	7

Each case has been visited by the Sanitary Inspector, who gave printed and verbal instructions to the patient as to precautions that should be taken to prevent the spread of the disease, and when required sputum bottles and disinfectants were provided. In those cases that terminated fatally the room occupied by the patient was disinfected. When the Health Visitor was appointed in July arrangements were made for frequent re-visits to see that the directions given were carried out. In all instances the first visit was made by the Inspector, who made careful notes of the surroundings of the patient, and when necessary the house was scheduled to be dealt with under the Housing Regulations.

It soon became evident from these inquiries that the majority of the cases did not seek medical advice until the disease had reached such an advanced stage that they could not work. They then used up their resources in a few months and were obliged to obtain relief from the Guardians. The necessity for such action is now past owing to the Sanatorium benefits of the Insurance Act, and when a notification is received the opportunity is taken of examining all contacts of the patient that are not in good health if they are not already under the care of a medical man; these I see at the office, and if necessary they are referred for treatment at the Tuberculosis Dispensary.

Of the 28 cases notified, 22 were males and 6 were females; 20 of these were between the ages of 15 and 45. The following de-

tails relating to 25 cases are of interest: In 10 there was a family history of consumption, in 13 none; in 2 the patient had been in close contact with a person suffering from the disease, but not a member of his family. These facts are of importance, because of the widespread belief that exists that consumption is purely a family disease from which there is no escape. Most authorities now hold that tuberculosis is an infectious disease which is perfectly harmless to those in contact with the sufferer if certain simple precautions are taken; in carrying these out attention to detail is all important, and in a long illness, which is usually characteristic of this disease, unless vigilance is exercised they are apt to be omitted, when a danger of conveying it to others is certainly present. I think that probably the reason why tuberculosis is so often regarded as a family disease is explained by the patient omitting to carry out such precautions, and so it spreads to those in contact with him, which usually are members of his family.

The environment of the patient at home was as follows in the 25 cases:—General surroundings good, 21; bad, 4; cleanliness good, 21; fair, 3; bad, 1; sleeping accommodation, separate bed, 19; separate bedroom, 15.

From this it is evident that the home surroundings were satisfactory in the majority of the cases. No instance of overcrowding was found, though owing to the smallness of the houses, the majority in this district having only four rooms, a separate bedroom could only be provided for 15 out of the 25 cases. This difficulty will shortly be met by the provision of shelters for such cases as require them.

The previous employment of the cases was:—Miner 10, timber filler 1, nil 2, iron worker 3, housewife 1, school 3, labourer 4; domestic servant 1—total, 25.

Eleven deaths from phthisis were recorded during the year. This yields a death-rate of .62 per 1,000 of the population; last year it was .52 per 1,000.

In this district no institution for the treatment of phthisis exists. Under the County Scheme it is proposed to offer treatment either at the Dispensary or Sanatorium for all cases whether insured or not. At the present time treatment at the Dispensary only is available. The work is undertaken by Dr. Coppock, who is a whole-time officer appointed by the County Council.

(b) Other Tuberculous Diseases.

Five deaths were recorded during the year, compared with 7 in 1911. These forms of Tuberculosis are usually diseases of childhood. They all occurred under the age of 15. The Local Government Board have ordered that after February 1st, 1913, all these varieties of Tuberculosis shall be notifiable, and by the administrative action that will follow the receipt of such notifications it is hoped that the chances of recovery will be greater than has been possible in the past.

F. Means for preventing Mortality in Childbirth and in Infancy.

1. Diseases and Accidents of Pregnancy and Child Birth.

During 1912 no death was recorded in connection with these conditions. Five hundred and twenty-six births were registered as occurring in the district, the majority of which were attended by Registered Midwives. The supervision of the practice of the midwives is undertaken by the County Council, who have appointed Nurse Pritchard, your Health Visitor, to perform the routine inspection work that is required. There are 10 midwives on the roll in Whittington and Newbold; 2 are certificated, the remainder being enrolled by virtue of the length of time they were in practice before the passing of the Midwives Act in 1902. It is now illegal for anyone who is not a registered midwife to attend cases of labour unless under the supervision of a medical practitioner, and as the practice of the midwives is subject to very definite rules in regard to cleanliness and to calling in the help of a medical man if any abnormality arises, we can claim that the means for preventing

mortality in childbirth have been taken full advantage of, whilst in the course of time all midwives will have to be certificated, so that in each succeeding year the midwives' work will become more scientific and exact.

During the year two cases of puerpural fever were notified. Both had been attended by medical men, and were due to a septic disease of the patient before the advent of labour. The supervising authority was immediately notified of the existence of each case, and the midwife who was attending was suspended from ordinary practice until the danger of conveying the infection to others was over.

2. Infancy Mortality.

	1911.	1912.
Number of deaths under 1 year... ..	101	44
Infant Mortality (per 1,000 births) ...	193.1	83.6
England and Wales ...	130	95

The figures in the table show a very considerable reduction in the Infantile Mortality all over the country in 1912 compared with the previous year. The reduction in this district has been so considerable that it is necessary to state what factors have contributed to this. In the Special Report which was presented to you a year ago the causes of death were classified thus:—

Development Diseases.	
Meningitis and Convulsions.	
Miscellaneous.	
Diarrhœal Diseases.	} Preventable.
Respiratory.	
Infectious.	
Tuberculous.	

In 1911, 56 out of the 101 deaths under one year of age fell into the Preventable Group. In 1912 there were 14 out of 44, thus:—

	1911.	1912.
Diarrhœal Diseases	28	5
Respiratory	17	5
Infectious	7	3
Tuberculous... ..	4	1
	—	—
	56	14
	—	—

It will be seen that the chief difference is the reduction in the number of deaths from diarrhœal and respiratory diseases in 1912. The reduced death-rate from diarrhœa this year was solely due to the wet and cold summer, for unpaved common yards and privy middens are unfortunately still plentiful. These in a hot and dry summer, such as that of 1911, are the breeding grounds of this disease. The infection is conveyed in the dust from the ground, polluted by animal and vegetable filth, and by flies from the neighbouring midden to the inside of the house so that the food is quickly polluted. The low number of deaths this year must be taken as a guide to what can be obtained in warmer summers when in the urban parts of the district unpaved yards and middens have been abolished.

During the year the Council has focussed its attention on the means available for reducing the Infantile Mortality, and the steps that have been taken are:—

1. On July 15th the Notification of Births Act was declared in force in the district.

2. A Health Visitor was appointed, one of whose duties it is to visit the house as soon as possible after a child is born and to give the mother advice, more especially with regard to the suitable feeding of her infant.

3. During the 3rd quarter of the year an additional scavenger was appointed so that the middens in those parts of the

district where diarrhœa was most prevalent last year could be more frequently cleansed.

4. Leaflets containing general Advice to Householders, and special advice for the prevention of diarrhœa were sent to the parents of children who had been born within the year. A copy of these follows this section.

5. Under the Housing Regulations the Council has now begun to deal with the large number of unpaved yards and middens in the district.

6. The Education Authority in the autumn commenced the teaching of Home Management to the elder girls, and Continuation Classes have been formed for those who have left school. This is a subject that has proved most popular in the schools, and we expect that the interest shown at this age will be kept up so that the Continuation Classes will be well attended.

LEAFLET 1.

ADVICE TO HOUSEHOLDERS.

A.—As to the House:—

1. Floors should be scrubbed very often, as dirt may cause disease.
2. Walls should be dusted, not swept (tie duster on broom head and dust the walls all over, to keep the cobwebs and dirt away).
3. Bedroom windows must be opened first thing in the morning and all slops emptied and utensils thoroughly washed out with clean water early in the day.
4. Beds must be stripped, shaken, and turned every morning and the bed clothes thrown back and left to air till afternoon.

5. As few people as possible—not more than two or three, as a rule—should sleep in the same bedroom.
6. No rubbish is to be put in the bedroom grates, and all chimneys must be kept clear.
7. No pieces of carpet, bagging or old clothing are to be hung across the windows. These keep the bad air from getting out and the fresh air from coming in.

B.—As to the Yard, Brewhouse, Closets, Ashtubs:—

1. Keep the Yard clean. Brush it every day and thoroughly swill it once a week. Clean out all yard gullies and fill with clean water weekly.
2. No wet rubbish must be thrown into the ashplace, which must always be kept dry. Potato parings, scraps of food, and such like should be thrown behind the fire.

C.—As to Food:—

1. No fruit, meat or fish that is going bad should ever be eaten.
2. All milk should be boiled. If for babies or young children must be boiled.
3. Beer and spirits are not necessary unless in illness or old age, and often causes ill-health. They are very bad for children.
4. Instructions for feeding babies can be had from the Medical Officer of Health or the Health Visitor.

SPECIAL NOTICE.

If the closets or drains are stopped up at a point out of reach, send at once to the Health Office, at the Council Depot.

In the case of Damp Rooms, Broken or Filthy Walls, Roofs

that let in rain, which your landlord will not put right, send word to the Council Depot and the Inspector will visit.

LEAFLET II.

DIARRHŒA.

If a Baby (or young child) has Diarrhœa, a doctor must be seen at once. Until the doctor has seen the child, give no breast milk, cows' milk or food of any kind; but only sips of cold boiled water (two or three teaspoonfuls in the hour).

Special Precautions against Diarrhœa.

Every baby should be fed at the breast if possible.

Diarrhœa is much commoner, and more dangerous, amongst hand-fed babies than amongst breast-fed babies.

Dummy-comforters should never be used.

If for any urgent reason, a baby is bound to be hand-fed, then the following measures should be taken:—

1. The baby must have nothing but milk, or milk and water, till it is nine months old. Babies fed on bread, biscuits, etc., are particularly likely to get diarrhœa.
2. All milk (or milk and water) should be boiled before being used, and the milk jug or basin should be covered, and kept in a cool place, in cold water.
3. Feeding-bottles with tubes must never be used. The bottle should be boat-shaped with an india-rubber teat. The bottle must be washed and the teat turned inside out, and washed thoroughly after each feed.
4. Flies must be kept away from all milk and food, by using muslin or linen covers.

General Precautions against Diarrhœa.

1. The house should be cleaned very frequently. The window should be left open day and night, and the slops taken away early in the morning.

2. The yard and drain traps should be kept clean. No tea leaves, cabbage leaves, potato peelings, fish, etc., should be put in the ash-place. They should be burned. Ash-bins should be covered.
 3. Offensive closets and bad drains should be reported to the Medical Officer of Health, at the Council Depot.
-

NOTIFICATION OF BIRTHS ACT, 1907.

This Act came into force in the district on July 15th of this year, and since that date it is the duty of the father of every child born within the district, if he is actually residing in the house where the birth takes place, or of the person in attendance upon the mother at the time of, or within six hours after, the birth to give notice in writing of the birth to the Medical Officer of Health. This notice has to be received within thirty-six hours after the birth.

The duty of notifying, although cast upon the father of the child, as well as the doctor or midwife attending the case, is generally undertaken by the latter, and by Section 2 of the Act the Local Authority supplies stamped and addressed forms for this purpose to the medical practitioners and midwives of the district.

The notification that is required to be made by this Act is in addition to and not in substitution for the requirements of any Act relating to the registration of births.

The Council appointed Nurse Pritchard, who also is the School Nurse for this District, to carry out the work entailed by the adoption of this Act. Since the middle of July 232 notifications have been received, in 23 instances those responsible failed to notify the birth. The majority have been visited by the Nurse, who has been well received everywhere, in only one instance was a request sent not to visit. During her visits the Nurse makes inquiries as to the way the child is fed, and where artificial means are used gives ad-

vice as to how this should be done. Instruction is also given on the general hygiene of the home and general hygiene of the mother. A second visit is paid about six weeks after the first, and if the child is not thriving it is kept under observation until it is making satisfactory progress. It is in these cases that the most good will result from the Nurse's visits in reducing the number of preventable deaths that are due to improper feeding.

As this work has only been in operation a few months the information at my disposal is not large enough for a detailed report of the working of the Act, but from that which has been received it appears that in this district none of the mothers have to go out to work, and nearly all are able to nurse their infants themselves, so that in the course of a few years there is every reason to hope that a considerable reduction of the Infant Mortality of this district will be attained. In conclusion I reproduce the figures given by Nurse Pritchard as to the method of feeding, the size of the houses, their cleanliness or otherwise.

No. of Rooms in Houses Visited.				No. of Deaths.	
4	had	8	rooms	..	—
2	„	7	„	...	—
42	„	6	„	...	2
13	„	5	„	...	—
146	„	4	„	...	7
5	„	3	„	...	1
4	„	2	„	...	—
					10

House Sanitation.		No. of Deaths.	
Clean	119	...	5
Fairly Clean	62	...	2
Dirty	23	...	3

Method of Feeding.

Breast	192
Bottle	15
Spoon	1

G. Vital Statistics of the District.

BIRTHS.

The total number of births during 1912 was 532, 6 of which occurred outside the district, but as the parents belong to Whittington and Newbold they have been accredited to this district by the Registrar-General. Tables have been prepared showing the distribution in Wards during the months of the year, with the sex of the child. In these tables, as in others that will be seen in various parts of the Report.

Ward 1 is the Old Whittington Ward.

Ward 2 is the New Whittington Ward.

Ward 3 is the Whittington Moor Ward.

Ward 4 is the Newbold Moor Ward.

Ward 5 is the Newbold Ward.

The birth-rate for 1912 is 30.4. This is practically the same as it was last year, but much lower than the previous five years. The birth-rate for England and Wales in 1912 is 28.3.

In a third table various details of the Illegitimate Births are given.

During the year 11 still-births occurred in the practice of the registered midwives, as against 13 last year.

Births for the Year 1912.

Month.	Boys.	Girls.	Total.
January	19	24	43
February	18	24	42
March	22	27	49
April	18	17	35
May... ..	25	11	36
June	25	25	50
July	24	27	51
August	27	27	54
September	21	20	41
October... ..	12	21	33
November	24	29	53
December	21	18	39
	<hr/>	<hr/>	<hr/>
	256	270	526
	<hr/>	<hr/>	<hr/>

Births in Wards, 1912.

Month.	Ward 1.	Ward 2.	Ward 3.	Ward 4.	Ward 5.	Total.
January ...	5	10	11	15	2	43
February ...	9	12	9	11	1	42
March ...	14	11	12	10	2	49
April ...	11	7	7	7	3	35
May ...	11	4	10	10	1	36
June ...	17	8	15	10	—	50
July ...	6	17	8	16	4	51
August ...	16	7	13	16	2	54
September ...	10	13	8	10	—	41
October ...	10	6	8	7	2	33
November ...	13	8	12	19	1	53
December ...	9	6	11	9	4	39
Children belonging to District but born outside it						6
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
Total ...	131	109	124	140	22	532

Illegitimate Births.

	Estimated	Illegitimate		
	Population.	Births.		
	1912.	Boys.	Girls.	Total.
Ward 1	3948	2	3	5
Ward 2	3661	3	3	6
Ward 3	3624	2	1	3
Ward 4	4821	6	1	7
Ward 5	1409	0	0	0
<hr/>				
Born outside the District ...		1	4	5
<hr/>				
Total	17463	14	12	26
<hr/>				

DEATHS.

In the accompanying table is shown the monthly number of deaths in males and females. There were 201 in all, giving a death-rate of 11.5 per 1,000 of the population; for England and Wales in 1912 it was 13.3. In arriving at this figure the number of persons belonging to the district who died outside it is added to the number who died in the district, those of non-residents who died in the district being subtracted. These numbers are distributed to each Sanitary District quarterly by the Registrar-General. The actual figures are shown in Table I. of the Local Government Board.

The ages at death are as follows :—

	1912.		1911.	
	Number.	Per-centage.	Number.	Per-centage.
In Infancy (up to 5)	64	31.84	156	50
School Age (5—15)	10	4.97	20	6.41
Working Life (15—65)	64	31.84	76	24.36
Old Age (over 65)	63	31.35	60	19.23
<hr/>				
Total (all ages)	201	100.00	312	100.00
<hr/>				

Deaths for the Year 1912.

Month.	Males.	Females.	Total.
January	6	6	12
February	10	9	19
March	12	14	26
April	4	7	11
May... ..	16	5	21
June	6	6	12
July... ..	9	4	13
August... ..	7	7	14
September	12	5	17
October... ..	10	7	17
November	8	8	16
December	8	15	23
Total	108	93	201

Deaths in Wards.

Ward.	All Ages.	Infant Deaths.
Old Whittington	60	13
New Whittington... ..	28	5
Whittington Moor	37	15
Newbold Moor	63	11
Newbold	13	0
Total	201	44

It will be seen that there is a very considerable fall in the number of deaths this year compared with last. This is found in all the age periods except that of old age, but is most marked in the period of infancy, and will be found further discussed under a separate heading.

In Table III. of the Local Government Board the various

causes and ages of death will be found set out in detail. Certain of these for which it is usual to calculate special death-rates will be referred to.

ZYMOTIC DISEASES.—This term is usually applied to those communicable or infectious diseases which occur in epidemics, and the death-rate from the principal zymotic diseases affords valuable evidence of sanitary condition. The death-rate per 1,000 from the seven principal diseases from 1912 and the preceding year is shown in the table:—

	1912.	1911.
Small-pox... ..	0 ...	0
Measles	2 ...	15
Scarlet Fever	2 ...	2
Diphtheria	0 ...	6
Whooping-cough	5 ...	8
Enteric Fever	0 ...	5
Diarrhœa	7 ...	35
	—	—
	16	71

Death-rate per 1,000, .91 in 1912.

4.1 in 1911.

The large drop in this death-rate this year is due to the comparatively small number of deaths from diarrhœa, which is one of the few benefits of a wet and cold summer.

	1912.	1911.
RESPIRATORY DISEASES.		
Deaths... ..	44 ...	70
Rate per 1,000	2.5 ...	4.04

The death-rate this year is much more satisfactory than it was in 1911, the diminution being most marked in the period of infancy. The ages at which the deaths occurred will be found in Table III. of the Local Government Board.

Occupation Mortality.

At the request of the County Medical Officer, the following table has been prepared to show the occupation of all persons over 10 years of age who died in 1912:—

OCCUPATION.				MALES.	FEMALES.
General or Local Government of the Country ...				3	2
Defence of the Country ...					
Professional and their Subordinate Services ...					
Domestic Offices or Services ...					
Commercial Occupations ...					
Conveyance of Men, Goods, and Messages ...				—	—
Agriculture ...				2	—
In and About Mines and Quarries ...				8	—
Metals, Machines, Implements and Conveyances ...				11	—
Precious Metals, Jewels, Watches, etc. ...					
Building and Works of Construction ...				2	—
Wood, Furniture, Fittings and Decorations ...					
Brick, Cement, Pottery and Glass ...				5	—
Chemicals, Oils, Grease, Soap, Resin, etc. ...					
Skins, Leather, Hair and Feathers ...					
Paper, Prints, Books and Stationary ...					
Textile Fabrics ...				—	—
Dress ...				10	—
Food, Tobacco, Drink and Lodging ...					
Gas, Water, Electricity and Sanitary Service ...					
Other, Undefined Workers and Dealers ...					
Without Specific Occupiers or Unoccupied ...				28	59
Total ...				69	61

As Dr. Barwise observed in the letter which accompanied the occupation table produced in another section of the Report, this

information will have to be collected for a number of years before any conclusions of value can be made, but as years go on it will become increasingly valuable, especially in dealing with the Tuberculosis question.

Violent Deaths.

There were 7 violent deaths this year, as follows:—

1 from concussion of the brain due to a fall.

1 from injury to the skull due to a fall.

1 from broken neck.

2 from being accidentally run over.

2 from burns.

There were 2 suicides by hanging, and 1 by throwing himself down a colliery shaft.



TABLE I.—(LOCAL GOVERNMENT BOARD).

Vital Statistics of Whole District during 1912 and previous Years.

Year.	Population estimated to Middle of each year.	Births.			Total Deaths Registered in District.		Transferable Deaths.		Nett Deaths belonging the District.			
		Uncorrected Number.	Nett.		Number.	Rate.	of Non-residents registered in the District.	of Residents not registered in the District.	Under 1 Year of age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births	Number.	Rate.
I	2	3	4	4	6	7	8	9	10	11	12	13
1907.	16,454	580	..	35.2	241	14 6	..	..	82	141.3	..	..
1908.	16,630	668	..	40.1	221	13.2	..	..	72	107.8	..	..
1909.	16,810	599	..	35.1	261	15.5	..	..	77	128.5	..	..
1910.	17,010	590	..	34.6	215	12.6	..	..	65	110	..	..
1911.	17,284	521	523	30.2	272	15.7	0	40	101	193.1	312	18
1912.	17,463	526	532	30.4	176	10.07	2	27	44	82.7	201	11.5

Area of District in acres (land and in-land water) ... } 4179

Total Population at all ages 17 213 }
Number of Inhabited Houses 3,536 } At Census
Average number of persons per house... .. 4'8 } 1911.

TABLE II.—(LOCAL GOVERNMENT BOARD).

Cases of Infectious Diseases notified during the Year 1912.

Notifiable Diseases.	Number of Cases Notified.								Total Cases notified in each Locality(<i>e g.</i> Parish or Ward) of the District.					Total Cases Removed to Hospital.
	At all ages.	At Ages—Years.							Old Whittington.	New Whittington.	Whittington Moor.	Newbold Moor.	Newbold.	
		Under 1.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards.						
Small-pox .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cholera (C) Plague (P) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria (including Membranous croup)..	3	..	..	2	1	..	..	..	..	..	..	2	1	0
Erysipelas	8	..	1	..	..	1	5	1	..	1	2	4	1	0
Scarlet Fever	163	1	42	111	4	5	..	..	17	5	57	75	9	86
Typhus fever .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric fever	1	..	..	..	1	..	..	..	1	..	..	..	..	1
Relapsing fever (R) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued fever (C) ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal fever	2	..	..	..	..	2	..	..	..	1	..	1	..	0
Cerebro-spinal Meningitis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Poliomyelitis .. ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pulmonary Tuberculosis	28	..	1	3	8	12	4	..	9	3	4	7	5	0
Totals	205	1	44	116	14	20	9	1	27	10	63	89	15	87

Isolation Hospital.—Penmore Hospital, Chesterfield, controlled by the Chesterfield Joint Hospital Committee.

Total Available Beds—30.

Number of Diseases that can be concurrently treated—3.

TABLE III. (LOCAL GOVERNMENT BOARD).

Causes of, and Ages at Death during the Year 1912.

Causes of Death.	Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.									Total Deaths whether of "Residents" or "non-Residents" in Institutions in the District.
	All ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.	
I	2	3	4	5	6	7	8	9	10	11
All Causes } Certified	191	42	11	9	8	10	16	35	60	I
} Uncertified	10	2	..	..	2	..	..	3	3	..
Enteric Fever .. ..	..	..	..	..	..	..	..	..	..	..
Small Pox .. ..	..	..	..	..	..	..	..	..	..	..
Measles	2	I	..	..	I	..	..	..	..	..
Scarlet Fever	2	..	..	..	I	I	..	..	..	..
Whooping Cough	5	I	2	I	I	..	..	..	..	..
Diphtheria and Croup ..	..	..	..	..	..	..	..	..	..	..
Influenza	2	..	..	..	..	I	..	..	I	..
Erysipelas .. ..	..	..	..	..	..	..	..	..	..	..
Phthisis (Pulmonary Tuberculosis)	11	..	..	..	..	4	4	3	..	..
Tuberculous Meningitis ..	2	I	..	..	I	..	..	..	..	..
Other Tuberculous Diseases..	3	..	2	..	I	..	..	..	..	..
Cancer, malignant disease ..	12	..	..	..	..	..	..	6	6	..
Rheumatic Fever .. ..	..	..	..	..	..	..	..	..	..	..
Meningitis .. ..	..	..	..	..	..	..	..	..	..	..
Organic Heart Disease ..	22	..	..	..	I	..	4	11	6	..
Bronchitis	15	I	I	..	..	..	..	I	12	..
Pneumonia (all forms) ..	26	4	3	3	2	I	4	2	7	..
Other diseases of respiratory organs.. ..	3	..	..	2	..	..	..	..	I	..
Diarrhœa and Enteritis ..	7	5	I	..	..	I	..	..	..	..
Appendicitis and Typhlitis ..	I	..	..	..	..	..	..	I	..	..
Cirrhosis of Liver	3	..	..	..	..	..	..	I	2	I
Alcoholism .. ..	..	..	..	..	..	..	..	..	..	..
Nephritis and Bright's Disease	4	..	..	..	..	..	..	2	2	..
Puerperal Fever .. ..	..	..	..	..	..	..	..	..	..	..
Other accidents and diseases of Pregnancy and Parturition .. ..	..	..	..	..	..	..	..	..	..	..
Congenital Debility and Malformation, including Premature Birth	17	16	I	..	..	..	..	..	..	..
Violent Deaths, excluding Suicide	7	..	..	I	I	I	..	I	3	..
Suicide	2	..	..	..	..	..	..	I	I	..
Other Defined Diseases ..	47	15	I	I	..	I	4	6	19	..
Diseases ill-defined or unknown.. ..	8	..	..	I	I	..	..	3	3	..
	201	44	11	9	10	10	16	38	63	I

TABLE IV.—(LOCAL GOVERNMENT BOARD).

Infant Mortality, 1912.

Nett Deaths from stated causes at various Ages under 1 Year of Age.

Cause of Death.				Under 1 week.	1—2 weeks.	2—3 weeks.	3—4 weeks.	Total under 4 weeks.	4 weeks and under 3 mos.	3 mos. and under 6 mos.	6 mos. and under 9 mos.	9 mos. and under 12 mos.	Total Deaths under 1 year.
All causes	Certified	..	..	13	1	1	1	16	7	11	4	4	42
	Uncertified	..	..	2	..	..	..	2	..	..	..	..	2
Small-pox	..	..	..	..	..	..	..	..	..	..	..	..	..
Chicken-pox	..	..	..	..	..	..	..	..	..	..	..	..	..
Measles	..	..	..	..	..	..	..	..	..	..	..	1	1
Scarlet Fever	..	..	..	..	..	..	..	..	..	..	..	..	..
Whooping-Cough	..	..	..	..	..	..	..	..	..	1	..	..	1
Diphtheria and Croup	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas	..	..	..	..	..	..	..	..	..	..	..	..	..
Tuberculous Meningitis	..	..	..	..	..	..	..	..	..	1	..	..	1
Abdominal Tuberculosis (<i>b</i>)	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Tuberculous Diseases	..	..	..	..	..	..	..	..	..	..	..	..	..
Meningitis (<i>not Tuberculous</i>)	..	..	..	..	..	..	..	..	..	..	..	..	..
Convulsions	..	..	..	4	..	..	..	4	2	3	2	..	11
Laryngitis	..	..	..	..	..	..	..	..	..	..	..	..	..
Bronchitis	..	..	..	..	..	..	..	..	..	..	1	..	1
Pneumonia (all forms)	..	..	..	..	..	..	..	..	1	1	..	2	4
Diarrhœa	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteritis	..	..	..	..	..	..	..	..	3	1	1	..	5
Gastritis	..	..	..	..	..	..	..	..	..	..	..	..	..
Syphilis	..	..	..	..	..	..	..	..	..	1	..	..	1
Rickets	..	..	..	..	..	..	..	..	..	..	..	..	..
Suffocation, overlying	..	..	..	..	..	..	..	..	..	..	..	..	..
Injury at Birth	..	..	..	..	..	..	..	..	..	..	..	..	..
Atelectasis	..	..	..	..	..	1	..	1	..	..	..	..	1
Congenital Malformations (<i>c</i>)	..	..	..	1	..	..	..	1	..	..	..	..	1
Premature Birth	..	..	..	9	1	..	..	10	..	..	..	..	10
Atrophy, Debility, and	..	..	..	..	..	..	..	..	..	..	..	..	..
Marasmus	..	..	..	1	..	..	1	2	..	2	..	1	5
Other Causes	..	..	..	..	..	..	..	..	1	1	..	..	2
				15	1	1	1	18	7	11	4	4	44

Nett Births in the year	{	legitimate	506	Nett Deaths in the year of	{	legitimate infants	44
		illegitimate	26			illegitimate infants	0





